City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) McGee Roofing LLC

Owner's Name(Please Print) Dustin McGee

Contact Person(Please Print) Catherine Fenin

Business Address(Please Print) 1514 18th Rd., Clay Center, KS 67432

Business Phone 785-632-6357

E-mail mcgeeroofing@sbcglobal.net

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	___Gravel/Soil	___Sewer Tanks	X Tree Trimming
___Electrical	___Lot Clearing/ Excavation	X Houses/Buildings	___ Skid Sheds
X Fencing	X Concrete/Flat Work	___Surveyor	X Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
X Siding/Windows	___Heating &Air Conditioning	___Landscaping	

X Roofer: KRRA Certificate Number(required) 13-116282

___Other: _____

- **All contractors, subcontractors or other skilled construction workers hired by the job or by the hour must be licensed by the City**, per Ordinances #408. Violations are punishable by a fine up to $100per violation.
- A **Certificate of Commercial General Liability Insurance**from an insurance company authorized to do business in the State of Kansas must be provided with this license application,kept current throughout the year and on file at City Hall. Insurance must include products and operations liability of not less than $300,000 per occurrence and $600,000 in aggregate.
- Without a current liability insurance certificate on file, your license will be canceled.
- The fee for a license is **$25.00**. Per Year

Customer: *On the date this document was signed by the Citythe above listed contractor was licensed to do business within Bennington Kansas . This means the contractor has paid a licensing fee and provided documentation of current liability insurance coverage. Expiration dates of liability insurance may vary. To verify current liability insurance for a contractor is on file with the City, contact City Hall (785)488-3767. The fact that a contractor is licensed is not an endorsement of that contractor's work, qualifications, or experience.*

I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 12/17/2025

City'sSignature _____ License Issued 12/17/2025 *Expires:Dec 31, 2026*

This form, when signed by the City, is your Contractor's License.
A copy of this license must be available on the job site during construction.

Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd via 12/30
Kanpay.

2026

City of Bennington, Kansas
Application for Contractor's License

Contractor/ Company(Please Print) Weddle & Sons Roofing, Inc.

Owner's Name(Please Print) Allyn Weddle

Contact Person(Please Print) Karen Schoenhoff

Business Address(Please Print) 504 Francis Street Suite F1, Salina, KS 67401

Business Phone 785-829-5400

E-mail Karen@weddleandsons.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

X Roofer: KRRA Certificate Number(required) 13-115046

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature Karen Schoenhoff Date December 26, 2025

City'sSignature [signature] License Issued 12/30/25 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd. via Check

2026

City of Bennington, Kansas
Application for Contractor's License

Contractor/ Company(Please Print) Tailored Roofing & Remodeling

Owner's Name(Please Print) Roy Moore

Contact Person(Please Print) Keri Frase

Business Address(Please Print) 2313 N. Zoo Park Cir
Wichita KS 67205

Business Phone 316-221-8325

E-mail KeriFrase@TailoredRemodeling.com

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 12-16-25

City's Signature _____ License Issued 12/16/25 *Expires:Dec 31,* 2025 2026

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd. 12/30 via Kanpay $25.00

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Monarch Home Improvement LLC dba DaBella

Owner's Name(Please Print) Donnie McMillan Jr.

Contact Person(Please Print) Compliance Department

Business Address(Please Print) 901 NE River Rd Ste 150 Topeka, KS 666616

Business Phone (503)-641-7676

E-mail compliance@dabella.us

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 12/30/2025

City'sSignature _____ License Issued 12/30/25 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd via KanPay

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Davidson Construction LLC.

Owner's Name(Please Print) Brian Davidson

Contact Person(Please Print) Brian Davidson

Business Address(Please Print) 423 N. Parker

Bennington, KS. 67422

Business Phone 785-488-8969

E-mail b55racing@yahoo.com

Please select the descriptions below indicating the type of service(s) you provide.

✓ General Construction	___ Gravel/Soil	___ Sewer Tanks	___ Tree Trimming
___ Electrical	✓ Lot Clearing/ Excavation	✓ Houses/Buildings	___ Skid Sheds
✓ Fencing	___ Concrete/Flat Work	___ Surveyor	___ Metal Work
___ Plumbing	___ Masonry/Retaining Walls	___ Boat Docks	
✓ Siding/Windows	___ Heating &Air Conditioning	___ Landscaping	

___ Roofer: KRRA Certificate Number(required)_____

___ Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 1/1/2026

City's Signature Deanna Victory-Smith License Issued 1/1/26 *Expires:Dec 31,* 2026

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) WADDLE's Htg & Cooling JM

Owner's Name(Please Print) Tammy Waddle

Contact Person(Please Print) Tammy Waddle

Business Address(Please Print) 346 N 9th
Salina Ks 6749

Business Phone 785-827-2621

E-mail tammy@waddlesheating.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	✓Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	✓Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature Waddle's Heating & Cooling JM Date 12-26-25

City'sSignature Duanna Gilbert License Issued 12/26/25 *Expires:Dec 31, 2026*

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Building Codes Enforcement
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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Denny's Plumbing

Owner's Name(Please Print) Nathan Wuthnow

Contact Person(Please Print) Nathan Wuthnow

Business Address(Please Print) 1618 NW 4th
Abilene, KS 67410

Business Phone 785-243-2661

E-mail office@dennysplumbing.net

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
✓Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature _____ Date 12-29-25

City'sSignature _____ License Issued 12/29/25 *Expires:Dec 31,* 2026

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Pestinger Heating Air + Electrical Inc

Owner's Name(Please Print) Dustin Pestinger

Contact Person(Please Print) Michelle Fulton

Business Address(Please Print) 125 E Avenue A
Salina, KS 67401

Business Phone 785-827-6361

E-mail mfulton@pestingerheating.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
_X_Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	_X_Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature Michelle Fulton Date 12/30/25

City'sSignature [signature] License Issued 12/30/25 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

2026 City of Bennington, Kansas
~~2025~~ Application for Contractor's License

Contractor/ Company(Please Print) Eaton Roofing & Exteriors, Inc.

Owner's Name(Please Print) Chad Harrison

Contact Person(Please Print) Chad Harrison

Business Address(Please Print) 3821 W Bounous St. Wichita, KS 67213

Business Phone 316-943-0600

E-mail charrison@eatonroofing.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

X Roofer: KRRA Certificate Number(required) 19-007451

___Other: _____

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Contractor's Signature _____ Date 12/30/2025

City'sSignature _____ License Issued 12/30/25 Expires:Dec 31, 2026

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Building Codes Enforcement
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785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd check #58359 1/13/26

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Salina Tree

Owner's Name(Please Print) Don Deatherage

Contact Person(Please Print) Darrin Deatherage

Business Address(Please Print) 2681 W. State Salina, KS 67401

Business Phone 785-827-2977

E-mail Marlene@KSbroadband.Net

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	X Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

X Other: Vegetation Management / spraying

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date Dec. 30, 2025

City'sSignature _____ License Issued 1/12/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) AS CONSTRUCTION LLC

Owner's Name(Please Print) ADAM SOUKUP

Contact Person(Please Print) ADAM SOUKUP

Business Address(Please Print) 324 N Nelson

Bennington, KS 67422

Business Phone 785-342-0979

E-mail a_soukup@hotmail.com

Please select the descriptions below indicating the type of service(s) you provide.

✓ General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature _____ Date 1/20/2026

City'sSignature _____ License Issued 1/23/26 *Expires:Dec 31, 2026*

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P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Landscape Consultants LLC

Owner's Name(Please Print) Matthew Wagoner

Contact Person(Please Print) Kellen Womochil

Business Address(Please Print) 1777 E Old Hwy 40
New Cambria, KS 67470

Business Phone 785-822-6540

E-mail accounts@lcsalina.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	✓Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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X Contractor's Signature _____ Date 1/8/2026

City'sSignature _____ License Issued 1/23/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

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P.O. box 415
Bennington, KS 67422

PD CK#

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) TAK Broadband LLC

Owner's Name(Please Print) Turbo Acquisition Corporation

Contact Person(Please Print) Trent Edwards

Business Address(Please Print) 4401 S Technology Drive

Sioux Falls, SD 57106

Business Phone 605-362-6630

E-mail forms@takbroadband.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

_x_ Other: installation of telecommunication

- **All contractors, subcontractors or other skilled construction workers hired by the job or by the hour must be licensed by the City**, per Ordinances #408. Violations are punishable by a fine up to $100per violation.
- A **Certificate of Commercial General Liability Insurance**from an insurance company authorized to do business in the State of Kansas must be provided with this license application,kept current throughout the year and on file at City Hall. Insurance must include products and operations liability of not less than $300,000 per occurrence and $600,000 in aggregate.
- Without a current liability insurance certificate on file, your license will be canceled.
- The fee for a license is **$25.00**. Per Year

Customer: *On the date this document was signed by the Citythe above listed contractor was licensed to do business within Bennington Kansas . This means the contractor has paid a licensing fee and provided documentation of current liability insurance coverage. Expiration dates of liability insurance may vary. To verify current liability insurance for a contractor is on file with the City, contact City Hall (785)488-3767. The fact that a contractor is licensed is not an endorsement of that contractor's work, qualifications, or experience.*

I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 01/08/2026

City's Signature _____ License Issued 1/16/2026 *Expires:Dec 31, 2026*

This form, when signed by the City, is your Contractor's License.
A copy of this license must be available on the job site during construction.

Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) A & M Construction

Owner's Name(Please Print) mike Livengood

Contact Person(Please Print) Amy Livengood

Business Address(Please Print) 670 N 170th Rd
Bennington, KS 67422

Business Phone 785-488-7707 (mike) 785-488-7709 (Amy)

E-mail alivengood79@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

✓ General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	✓ Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature Mike Livengood Date 1/12/2026

City'sSignature Adrianne Luther License Issued 1/12/2026 *Expires:Dec 31, 2026*

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Sent 1/16

Building Codes Enforcement
785-488-7015

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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Travis's Plumbing Service LLC

Owner's Name(Please Print) Travis Lobdell

Contact Person(Please Print) Travis Lobdell

Business Address(Please Print) 1018 W. Elm St. Suite C

Business Phone 785-643-8486

E-mail travisplumbingservice@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
X Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature [signature] Date 1/27/26

City's Signature [signature] License Issued 2/6/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

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P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Jae's Electric

Owner's Name(Please Print) Jim Reed

Contact Person(Please Print) Tabrenah Fairbanks

Business Address(Please Print) 422 E Avenue A
Salina, KS 67401

Business Phone 785 - 404 - 6533

E-mail tfairbanks@jaeselectric.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming	
X Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds	
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work	
___Plumbing	___Masonry/Retaining Walls	___Boat Docks		
___Siding/Windows	___Heating &Air Conditioning	___Landscaping		

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 2/12/2026

City'sSignature _____ License Issued 2/12/2026 Expires:Dec 31, 2026

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
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P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) All Seasons Tree Care

Owner's Name(Please Print) Valarie Davenport

Contact Person(Please Print) Cory Davenport

Business Address(Please Print) 159 N Columbia Ave.

Business Phone 785-819-1201

E-mail allseasonstreecare785@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	X Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature Valarie Davenport Date 4/13/2026

City'sSignature Duanne Sullenbarger License Issued 4/13/2026 Expires:Dec 31, 2026

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Chase Colosimo (PINK Contracting)

Owner's Name(Please Print) Chase Christian Colosimo

Contact Person(Please Print) Chase Christian Colosimo

Business Address(Please Print) 1703 Overhill Rd.
Abilene, KS 67410

Business Phone 785-407-0655

E-mail ccolosimo0655@outlook.com

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	X Gravel/Soil	___ Sewer Tanks	X Tree Trimming
___ Electrical	X Lot Clearing/ Excavation	X Houses/Buildings	X Skid Sheds
X Fencing	X Concrete/Flat Work	___ Surveyor	___ Metal Work
___ Plumbing	X Masonry/Retaining Walls	___ Boat Docks	
___ Siding/Windows	___ Heating &Air Conditioning	X Landscaping	

___ Roofer: KRRA Certificate Number(required)_____

X Other: small misc. jobs

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Contractor's Signature _____ Date 4/20/2026

City'sSignature _____ License Issued 4/20/26 *Expires:Dec 31, 2026*

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Building Codes Enforcement 785-488-7015
785-488-3767 Office 785-488-3375 Fax
P.O. box 415 Bennington, KS 67422

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✓ Ins

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Comfort Heating & Air

Owner's Name(Please Print) Tucker Hilbert

Contact Person(Please Print) Lauren Arnold

Business Address(Please Print) 1500 S Broadway, Salina, KS 67401

Business Phone 785-822-7550

E-mail laurensalinacomfort@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	X Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature Lauren Arnold Date 09-02-2026

City'sSignature [signature] License Issued 9/3/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement 785-488-7015
785-488-3767 Office 785-488-3375 Fax
P.O. box 415 Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Choitz Electric, Inc.

Owner's Name(Please Print) Randy & Michaelle Choitz

Contact Person(Please Print) Michaelle (Mikki) Choitz

Business Address(Please Print) 3620 S Crest Ln - Salina

Business Phone 785-577-6087

E-mail choitz.electric@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
X Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature _____ Date 8-30-26

City's Signature _____ License Issued 9/1/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

OK

Contractor/ Company(Please Print) Summit Plumbing LLC

Owner's Name(Please Print) Eric Campbell

Contact Person(Please Print) Eric Campbell

Business Address(Please Print) 321 N 12th St, Salina KS 67401

Business Phone 785-827-1500

E-mail SummitSalina@yahoo.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
X Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature _____ Date 9/3/2026

City'sSignature _____ License Issued 9/3/2026 Expires:Dec 31, 2026

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Building Codes Enforcement
785-488-7015

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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Freedom Drains LLC

Owner's Name(Please Print) Travis Finch & Chad Trusty

Contact Person(Please Print) Travis Finch

Business Address(Please Print) 236 Smithers St
Salina, Ks 67401

Business Phone 785-829-7367

E-mail freedomdrainsllc@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
X Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

X Other: Plumbing/HVAC, New Construction, Backflow

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Contractor's Signature [signature] Date 09-02-26

City'sSignature [signature] License Issued 9/3/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Wishon Heating & Air-Conditioning

Owner's Name(Please Print) Cody Wishon

Contact Person(Please Print) Cody

Business Address(Please Print) 220 N. 7th Salina, Ks 67401

Business Phone 785-577-8313

E-mail Cody@wishonheatingandair.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
X Plumbing	___Masonry/Retaining Walls	___Boat Docks	
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Contractor's Signature Cody Wishon Date 9-3-26

City's Signature [signature] License Issued 9/3/26 *Expires:Dec 31, 2026*

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Building Codes Enforcement
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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

Pd

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Huelsmann Remodeling

Owner's Name(Please Print) Treyton huelsman

Contact Person(Please Print) Trey

Business Address(Please Print) 215 E burlington

Business Phone 785-404-8732

E-mail huelsmannremodeling@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
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___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature _____ Date 5-27-26

City'sSignature _____ License Issued 5/27/2026 *Expires:Dec 31, 2026*

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Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Pete Garcia - Garcia Masonry

Owner's Name(Please Print) _____

Contact Person(Please Print) _____

Business Address(Please Print) 2527 Dunnwood Dr.

_____

Business Phone 785-819-0340 office 785-665-2333

E-mail garciamasonryKS@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	X Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

- **All contractors, subcontractors or other skilled construction workers hired by the job or by the hour must be licensed by the City**, per Ordinances #408. Violations are punishable by a fine up to $100per violation.
- A **Certificate of Commercial General Liability Insurance**from an insurance company authorized to do business in the State of Kansas must be provided with this license application,kept current throughout the year and on file at City Hall. Insurance must include products and operations liability of not less than $300,000 per occurrence and $600,000 in aggregate.
- Without a current liability insurance certificate on file, your license will be canceled.
- The fee for a license is **$25.00**. Per Year

Customer: *On the date this document was signed by the Citythe above listed contractor was licensed to do business within Bennington Kansas . This means the contractor has paid a licensing fee and provided documentation of current liability insurance coverage. Expiration dates of liability insurance may vary. To verify current liability insurance for a contractor is on file with the City, contact City Hall (785)488-3767. The fact that a contractor is licensed is not an endorsement of that contractor's work, qualifications, or experience.*

I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 3-13-26

City'sSignature _____ License Issued_____ *Expires:Dec 31, 2026*

This form, when signed by the City, is your Contractor's License.
A copy of this license must be available on the job site during construction.

Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

garciamasonryKS@gmail.com

Done & Emailed 1/29/26

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) D.R.C.L. Electric Inc

Owner's Name(Please Print) Diane L Hicks

Contact Person(Please Print) Diane Hicks or Rick Hicks

Business Address(Please Print) PO Box 122

Lone Jack, MO 64070

Business Phone Diane/Office 785-822-4631 Rick Project Manager 785-822-5329

E-mail dianedrcl@yahoo.com rickdrcl@yahoo.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction ___Gravel/Soil ___Sewer Tanks ___Tree Trimming

X Electrical ___Lot Clearing/ Excavation ___Houses/Buildings ___ Skid Sheds

___Fencing ___Concrete/Flat Work ___Surveyor ___Metal Work

___Plumbing ___Masonry/Retaining Walls ___Boat Docks

___Siding/Windows ___Heating &Air Conditioning ___Landscaping

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature Diane L Hicks Date 1/26/2026

City'sSignature Duane Luthi License Issued 1/29/2026 *Expires:Dec 31, 2026*

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Building Codes Enforcement
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785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) City Plumbing + HVAC

Owner's Name(Please Print) Craig Stewart

Contact Person(Please Print) Kim Barron

Business Address(Please Print) 225 n. 5th st, Salina KS 67401

Business Phone 785-825-5459

E-mail billing@cityplm.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction ___Gravel/Soil ___Sewer Tanks ___Tree Trimming
___Electrical ___Lot Clearing/ Excavation ___Houses/Buildings ___ Skid Sheds
___Fencing ___Concrete/Flat Work ___Surveyor ___Metal Work
X Plumbing ___Masonry/Retaining Walls ___Boat Docks
___Siding/Windows X Heating &Air Conditioning ___Landscaping
___Roofer: KRRA Certificate Number(required)_____
___Other: _____

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Contractor's Signature Craig Stewart Date 5-1-2026

City'sSignature _____ License Issued_____ *Expires:Dec 31, 2026*

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Building Codes Enforcement
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P.O. box 415
Bennington, KS 67422

Pd ✓
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City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Superior Plumbing & Heating Co, LLC

Owner's Name(Please Print) Trevor Franzen, CEO

Contact Person(Please Print) Parker Brown

Business Address(Please Print) 1655 B Wall St, Salina, KS 67401

Business Phone 785-827-5611

E-mail parkerb@spsalina.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction	___Gravel/Soil	✓Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___ Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
✓Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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Contractor's Signature Parker K. Brown Date 09/03/2026

City'sSignature Adrienne Smith License Issued 9/10/26 *Expires:Dec 31, 2026*

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Building Codes Enforcement
785-488-7015

785-488-3767 Office
785-488-3375 Fax

P.O. box 415
Bennington, KS 67422

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Salina Remodeling

Owner's Name(Please Print) Julio Guerrero

Contact Person(Please Print) Kevin Dority

Business Address(Please Print) 150 S. Broadway
Salina, KS 67401

Business Phone 785-226-1111

E-mail salinaremodeling1911@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

X General Construction	___Gravel/Soil	___Sewer Tanks	___Tree Trimming
___Electrical	___Lot Clearing/ Excavation	___Houses/Buildings	___Skid Sheds
___Fencing	___Concrete/Flat Work	___Surveyor	___Metal Work
___Plumbing	___Masonry/Retaining Walls	___Boat Docks	
___Siding/Windows	___Heating &Air Conditioning	___Landscaping	

___Roofer: KRRA Certificate Number(required)_____

___Other: _____

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I confirm all information provided above is accurate. I agree to the listed provisions above.

Contractor's Signature _____ Date 10-21-26

City'sSignature Adrianne [illegible] Date Issued 10/21/26 Expires:Dec 31, 2026

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Bennington, KS 67422

Here is the contractor's licenseapplication for Salina Remodeling.

2026

City of Bennington, Kansas
2026 Application for Contractor's License

Contractor/ Company(Please Print) Hinks Heating and Air.

Owner's Name(Please Print) Mike Hinks

Contact Person(Please Print) Melissa Hinks

Business Address(Please Print) 618 Francis Ave
Salina KS 67401

Business Phone 785-643-5538

E-mail hinksKeepingitKool@gmail.com

Please select the descriptions below indicating the type of service(s) you provide.

___General Construction ___Gravel/Soil ___Sewer Tanks ___Tree Trimming
___Electrical ___Lot Clearing/ Excavation ___Houses/Buildings ___Skid Sheds
___Fencing ___Concrete/Flat Work ___Surveyor ___Metal Work
___Plumbing ___Masonry/Retaining Walls ___Boat Docks
___Siding/Windows X Heating &Air Conditioning ___Landscaping
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Contractor's Signature _____ Date 11-9-26

City's Signature _____ License Issued 11/9/26 *Expires:Dec 31, 2026*

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2026 License
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